Exhibit B

Gerald Feigin, M.D.

204 East Holly Avenue

Sewell. NJ 08080

March 16, 2016

Review of death of Phillip White, Date of Death March 31, 2015

I have examined the police investigative reports; interviews with witnesses, police, emergency medical personnel, and internal affairs; hospital records; and crime scene investigations. I have viewed videos of the incident.

The autopsy reveals numerous superficial injuries. All of the injuries are confined to skin. The doginflicted injuries are very superficial penetrating the most superficial layers of skin. No internal injuries were noted. A posterior neck dissection revealed no trauma.

One of the most important observations was that the decedent was communicating verbally while en coute to inspire Hospital in Vineland. He was observed to have stopped breathing while en route.

There are only a few mechanisms for this to occur.

- 1. Head trauma. None was present
- 2. Asthma. None was observed
- 3. Heart disease. None identified
- 4. Drugs. Phencyclidine a known respiratory depressant was present and in toxic levels.

There was nothing in all of the reports that added any additional information to change my opinion as to cause and manner of death.

In summary: There was only superficial injuries to skin. The canine did not cause any penetrating wounds. There was no disease or internal injury noted. There was the presente of phencyclidine at toxic level. The cause of death is phencyclidine intoxication. Manner of death, accident. The police in way contributed to death.

Gerald Feigin, M.D.

Medical Examiner

Vineland/ 002043





State of New Jersey

OFFICE OF THE ATTORNEY GENERAL DEPARTMENT OF LAW AND PUBLIC SAFETY

DIVISION OF CRIMINAL JUSTICE

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AUTOPSY REPORT

CASE NUMBER: 06-15-0135 NAME: WHITE, PHILLIP G. DATE OF DEATH: 3/31/2015 DATE OF AUTOPSY: 4/02/2015

Date: 5/13/2015

CAUSE OF DEATH:

Phencyclidine intoxication

MANNER OF DEATH:

Accident

Designated Medidal Examiner

GF:jej

CHRIS CHRISTIE

Governor

Kim Guadagno

Lieutenant Governor

This case was completed as to the Cause and Manner of Death based on the initial circumstances and the available information at the time. Should additional information be forthcoming, the matter will be re-evaluated as needed.

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ANATOMIC FINDINGS:

- 1. Multiple superficial abrasions and few lacerations
- 2. Positive drug screen for phencyclidine and cocalne



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CERTIFICATION OF AUTOPSY PROCEDURE: I hereby certify that I, Gerald Felgin, MD, Designated Medical Examiner, Southern Regional Office, have performed an autopsy on the identified, refrigerated and unembalmed body of Phillip G. White, case number 06-15-0135 on April 2, 2015 at the Shore Medical Center in Somers Point, New Jersey. The autopsy started at 0915, and was completed at 1145 hours. This autopsy was performed with the assistance of Forensic Technicians James Santilli and Colleen Greco, and in the presence of Detective R. Henry, Badge #227 from the Cumberland County Prosecutor's Office and Detective Sgt. R. Keller, NJ State Police, CSI.

IDENTIFICATION:

The body is received in a body bag sealed with lock #0002420.

Identification was established by a NJ photographic driver's license, by Law Enforcement Officer Lt. Steven O'Neill

CLOTHING AND PERSONAL PROPERTY:

All property was turned over to DSG. R. Keller.

EVIDENCE OF RECENT MEDICAL INTERVENTION:

Endotracheal tube, Foley catheter and intravenous catheters, and bandage on left antecubital fossa

IDENTIFYING MARKS:

Tattoos on chest, upper extremities, neck and back

EXTERNAL EXAMINATION

The body is that of a medium-dark-skinned male measuring 74" and weighing 175 lbs. There is full rigor and lividity is unfixed posteriorly. The hair is dark and short.

MARKS OF TRAUMA, EXTERNAL:

- 1. Above the left eyebrow there is a 3/8" laceration partial full skin thickness. Above this there is a 2 x ½" in maximal dimension abrasion which runs parallel to the eyebrow.
- 2. Above the right eyebrow medially there is a 5/8 x ¼" abrasion. Surrounding this extending laterally and superiorly there are multiple abrasions in a 3 x ½" area. These abrasions are all superficial and measure less than ½" in greatest dimension.
- 3. The lateral portion of the right orbit extending over the temporal bone has a 2½ x ½ to 1" area of abrasion that extends laterally to the eyelids which are slightly swollen. Beneath this there is a 1/8" area of conjunctival hemorrhage superiorly.





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4. There is a ½ x ¼" abrasion of the right orbit superiorly, medially.

- The nose has laterally on the right a ½ and 5/8" abrasion. On the left there are four abrasions over the distal nostril measuring 1/8" in greatest dimension.
- 6. The upper lip to the left of midline has a ¼" abrasion.
- 7. Lateral lip on the left has a 5/8" x 1/2" abrasion.
- 8. The angle of the jaw, right a 1 x ½" abrasion.
- 9. The chin, left superficial 1/4" abrasion
- 10. Inferior to the right ear there is a 1/4" abrasion
- 11.Neck the lateral aspect of the thyroid cartilage has two parallel superficial abrasions measuring ¼" in greatest dimension.
- 12. Below the left ear there is a superficial linear 1/4" x 1/16" abrasion.
- 13. Left arm anterior overlying the bicep muscle there is a 2 x ½" and a ¼ x ¼" area of parallel abrasions, these are consistent with dog injuries. Surrounding this there are multiple superficial abrasions in a 3 x 3" area. These abrasions measure less than ½" in greatest dimension.
- 14. The left forearm there are multiple scattered abrasions over the lateral, posterior forearm measuring ¼ to 5/8" in greatest dimension. All are extremely superficial.
- 15. Left hand the interphalangeal joint of the thumb has a superficial ½" laceration. There is a ½" abrasion between the 2nd and 3rd metacarpal phalangeal joints. The tip of the 3rd finger has a 1/8" area of hemorrhage beneath the skin.
 16. Right hand the anterior 5th metacarpal phalangeal joint has a superficial 1/8"
- 16. Right hand the anterior 5th metacarpal phalangeal joint has a superficial 1/8" abrasion. The dorsum of the hand has scattered abrasions all measuring less than 1/16". They are present on the 4th finger.
- 17. Right forearm posteriorly there are three superficial abrasions of the forearm measuring ¼" in maximal dimension.
- 18. The upper left shoulder, posteriorly, has a 11/2 x 3/8" abrasion.
- 19. The central mid back has a 5/8 x 1/4" abrasion and a 1/4" abrasion.

Right lower extremity – the right knee extending over the upper leg in a 5 x 3" area has multiple superficial abrasions measuring from punctate to $\frac{1}{2}$ " in greatest dimension.

Left lower extremity – over the distal thigh and upper leg in a 6 x $3\frac{1}{2}$ " area there are multiple abrasions; all are superficial and measure up to $\frac{3}{4}$ " in greatest dimension. The majority measure less than $\frac{1}{2}$ ".

The external evidence of trauma has been described. The hair is dark and short. There is a short beard and moustache present. The eyes have brown irides, 5 mm pupils and clear conjunctivae. The left side of the lower lip has an area of drying and abrasion measuring ¾" in greatest dimension consistent with endotracheal tube placement. The teeth are natural. There is chipping of the right central incisor and drying of the lips on the right without evidence of contusion of the lips except for a minimal contusion of the lower lip on the right measuring less than ¾" in greatest dimension. The trauma has been noted. There are no other abnormalities noted in the chest, abdomen, lower extremities, and back and





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buttocks.

The penis is circumcised and testes are present within the scrotum.

There is a white powder noted on the right leg.

INTERNAL EXAMINATION

Body Cavities: The body is opened in a Y-shaped incision revealing a ½" panniculus. All of the cavities are dry and lined by smooth fibromembranous tissue without old or recent inflammatory process. The mediastinum and retroperitoneum are free of change.

Cardiovascular System: The heart weighs 510 grams. The epicardial surface is smooth. The coronary arteries are patent. The valves are thin and delicate and the myocardium is red-brown, without hemorrhage, softening or fibrosis noted. The aorta and major arteries are intact and show no atherosclerotic changes. The veins are free of thrombi and emboli.

Respiratory System: The right lung weighs 970 grams, and the left lung weighs 950 grams. The pleura is dark purple. The parenchyma is markedly edematous without tumor, fibrosis or consolidation noted. The tracheobronchial tree is unobstructed and lined by tan mucosa. The neck organs show no evidence of trauma within the strap muscles, cartilages, hyoid bone or surrounding soft tissues.

Digestive System: The tongue has a pink-tan mucosa and red-brown muscle. The esophagus is lined by grey granular mucosa. The stomach contains 20 cc of red-brown liquid. The mucosa and wall are free of change. The small and large intestines, anus, rectum and appendix are free of change.

Liver, Gallbladder and Pancreas: The liver weighs 2060 grams and has an intact capsule. The parenchyma is brown and congested. The gallbladder contains 20 cc of bile. No stones or obstructions are noted within the billiary tree. The pancreas and submandibular glands are tan and lobular.

Lymphoreticular System: The thymus is small and tan. The spleen weighs 90 grams and has an intact capsule. The parenchyma has normal architecture. Lymph node enlargement is not noted.

Endocrine System: The pituitary is of normal size and left in-situ. The adrenals are of normal size and have thin yellow cortices and brown medullae. The thyroid contains a moderate amount of colloid and is of normal size, shape and consistency.

Genitourinary System: The right kidney weighs 230 grams, and the left kidney weighs





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250 grams. The cortical surfaces are smooth. The medullary pyramids are pointed. The calyces, pelves and ureters are free of change. The bladder contains 20 cc of urine. The mucosa and wall are free of change.

The prostrate is rubbery and small. The testes have no evidence of trauma and are of normal structure.

Musculoskeletal System: There are no fractures or bony deformities noted. The muscles are red-brown and firm. Examination of the soft tissues of the hands, wrists, back, neck, buttocks and torso reveal no hemorrhage or fractures or other abnormalities.

Central Nervous System: The scalp, skull, dura and leptomeninges and cortical surface of the 1670 gram brain show no evidence of trauma. Cut sections reveal no abnormalities within the cerebral hemispheres, pons, cerebellum, midbrain, or medulla.

ADDITIONAL PROCEDURES

Histopathology: Sections of major organs are retained for microscopic analysis, if needed.

Toxicology: Specimens are submitted for toxicologic analysis.

Serology: A DNA card is retained.

Photography: Standard digital photographs are taken and retained.

Fingerprinting: Fingerprints are taken and retained.

X-Rays: None.



